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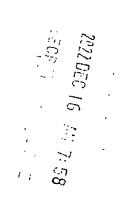
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TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

43 F Lan 1 47 47879	FINANCIAL LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Adam Abecassis, Esq		
		Name of Person	
	TouchSuite		
		Firm/Company	
	1081 Holland Drive		
		Address	
	Boca Raton, FL 33487		·_
		City/State and Zip Code	
	aabecassis@touchsuite.com		•
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Adam Abecassis		at ()	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TARTAR FINANCIAL LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/29/2022 and assigned Florida document number 1.22000503214

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LL.C" or the abbreviation "LL.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered agent and/or the new registered office address here:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

Alan M. Zietz

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_, Florida __

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ALLEN M ZIETZ	14247 W LA SEDONA CIRCLE	🗆 Add
		DELRAY BEACH, FL 33484	= Remove
		14247 W LA SEDONA CIRCLE	□Change
MGR	ALAN M ZIETZ	DELRAY BEACH, FL 33484	≣ Add
			Remove
		_	□Ādd
			☐ Remove
			□Change
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□ Change
			□Add
			□Remove
			☐ Change
			🖸 Add
			□Remove
			□Change

The purpose is to correct the misspelling of Alan M. Zietz name on the o	riginal filing.
All information is to stay the same, except for the correction of the name	from Allen to Alan where applicable.
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tive date, if other than the date of filing:	(optional)
fective date is listed, the date must be specific and cannot be prior to date of filing or lift the date inserted in this block does not meet the applicable statutory fi	
nent's effective date on the Department of State's records.	ing requirements, this date with not be that
rd specifies a delayed effective date, but not an effective time, at 12:01 a.r lled.	n, on the earlier of: (b) The 90th day afte
11-24/2022	
Adam Abecassis, Esc] .
Signature of a member or authorized representat	

Filing Fee: \$25.00

Typed or printed name of signee